



RFN

PATENT  
ATTORNEY DOCKET NO. 00786/457003

Certificate of Mailing: Date of Deposit: August 21, 2007

I hereby certify under 37 C.F.R. § 1.8(a) that this correspondence is being deposited with the United States Postal Service as **first class mail** with sufficient postage on the date indicated above and is addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Sarah Wilcox

Printed name of person mailing correspondence

Signature of person mailing correspondence

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Faustman et al.

Confirmation No.: 1044

Serial No.: 10/775,487

Art Unit: 1644

Filed: February 10, 2004

Examiner: Zachary S. Skelding

Customer No.: 21559

Title: METHODS FOR DIAGNOSING AND TREATING AUTOIMMUNE DISEASE

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

TRANSMITTAL OF SUPPLEMENTAL APPLICATION DATA SHEET

Transmitted herewith is a Supplemental Application Data Sheet for the above-referenced application. If there are any charges or any credits, please apply them to Deposit Account No. 03-2095.

Respectfully submitted,

Date: 13 August 2007

for Paul T. Clark  
Reg. No. 30,162

Todd Aamstad, Ph.D.  
Reg. No. 54,590

Clark & Elbing LLP  
101 Federal Street  
Boston, MA 02110  
Telephone: 617-428-0200  
Facsimile: 617-428-7045



## Supplemental Application Data Sheet

### Application Information

Application number: 10/775,487

Filing Date: 02/10/04

Application Type: Regular

Subject Matter: Continuation

Suggested Classification:

Suggested Group Art Unit:

CD-ROM or CD-R?: None

Number of CD disks:

Number of copies of CDs:

Sequence submission?: None

Computer Readable Form (CRF)?: No

Number of copies of CRF: None

Title: Methods for Diagnosing and Treating Autoimmune Disease

Attorney Docket Number: ~~47633/1124~~ 00786/457003

Request of Early Publication?: No

Request of Non-Publication?: No

Suggested Drawing Figure: Figure 1

Total Drawing Sheets: 35

Small Entity?: Yes

Petition Included?: Yes

Petition Type:

Licensed US Govt. Agency:

Contract or Grant Numbers:

Secrecy Order in Parent Appl.?: No

### **Applicant Information**

Applicant Authority Type: Inventor

Primary Citizenship Country: USA

Status: Full Capacity

Given Name: Denise

Middle Name: L.

Family Name: Faustman

Name Suffix:

City of Residence: ~~Weston~~ Boston

State or Province of Residence: MA

Country of Residence: USA

Street of mailing address: ~~74 Pinecroft Road~~ 180 Beacon St., #11G

City of mailing address: ~~Weston~~ Boston

State or Province of mailing address: MA

Country of mailing address: USA

Postal or Zip Code of mailing address: ~~02193~~ 02116

Applicant Authority Type: Inventor

Primary Citizenship Country: Japan

Status: Full Capacity

Given Name: Takuma

Middle Name:

Family Name: Hayashi  
Name Suffix:  
City of Residence: Malden  
State or Province of Residence: MA  
Country of Residence: USA  
Street of mailing address: 40 Sprague Street  
City of mailing address: Malden  
State or Province of mailing address: MA  
Country of mailing address: USA  
Postal or Zip Code of mailing address: 02148

**Correspondence Information**

Correspondence Customer Number: 21559

**Representative Information**

Representative Customer Number: 21559

**Domestic Priority Information**

Application:	Continuity Type:	Parent Application:	Parent Filing Date:
This Application	Is a Continuation of	09/258,682	02/26/1999
Which is a	Continuation-in-Part of	09/031,629	02/27/1998

**Foreign Priority Information**

Country:	Application Number:	Filing Date:	Priority Claimed:
----------	---------------------	--------------	-------------------

**Assignee Information**

Assignee name:	General Hospital Corporation
Street of mailing address:	<u>55 Fruit Street</u>
City of mailing address:	<u>Boston</u>
State of Province of mailing address:	<u>MA</u>
Country of mailing address:	<u>US</u>
Postal or Zip Code of mailing address:	<u>02114</u>